abcam

Product datasheet

Anti-Cardiac Troponin T antibody [EPR20266-143-6] - BSA and Azide free (Detector) ab252655

Recombinant

RabMAb

2 Images

Overview

Product name Anti-Cardiac Troponin T antibody [EPR20266-143-6] - BSA and Azide free (Detector)

DescriptionRabbit monoclonal [EPR20266-143-6] to Cardiac Troponin T - BSA and Azide free (Detector)

Host species Rabbit

Tested applications Suitable for: Sandwich ELISA

Species reactivity Reacts with: Human

Immunogen Recombinant fragment. This information is proprietary to Abcam and/or its suppliers.

General notes ab252655 is a BSA and Azide Free antibody supplied in an unconjugated format and it is suitable for sandwich ELISAs to quantify Human Cardiac Troponin T. The recommended pair for

sandwich ELISA is:

Capture: <u>ab252596</u>, Human Cardiac Troponin T Capture Antibody (unconjugated)

Detector: ab252655, Human Cardiac Troponin T Detector Antibody (unconjugated)

The reference range value is 195.3125 - 12500 pg/ml.

Our <u>carrier-free</u> antibodies are typically supplied in a PBS-only formulation, purified and free of BSA, sodium azide and glycerol. The carrier-free buffer and high concentration allow for increased conjugation efficiency.

This conjugation-ready format is designed for use with fluorochromes, metal isotopes, oligonucleotides, and enzymes, which makes them ideal for antibody labelling, functional and cell-based assays, flow-based assays (e.g. mass cytometry) and Multiplex Imaging applications.

Use our <u>conjugation kits</u> for antibody conjugates that are ready-to-use in as little as 20 minutes with <1 minute hands-on-time and 100% antibody recovery: available for fluorescent dyes, HRP, biotin and gold.

The recommended antibody orientation is based on internal optimization for ELISA-based assays. Antibody orientation is assay dependent and needs to be optimized for each assay type. Please note that the range provided for this antibody is only an estimation based on the performance of the product using the recommended antibody pair. Performance of the antibody pair will depend on the specific characteristics of your assay. We guarantee the product works in sandwich ELISA, but we do not guarantee the sensitivity or dynamic range of the antibody in your assay.

This product is a recombinant monoclonal antibody, which offers several advantages including:

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- High batch-to-batch consistency and reproducibility
- Improved sensitivity and specificity
- Long-term security of supply
- Animal-free production

For more information see here.

Our RabMAb[®] technology is a patented hybridoma-based technology for making rabbit monoclonal antibodies. For details on our patents, please refer to **RabMAb**[®] **patents**.

Properties

Form Liquid

Storage instructions Shipped at 4°C. Store at +4°C.

Storage buffer Constituent: 100% PBS

Carrier free Yes

Purity Protein A purified

Clonality Monoclonal

Clone number EPR20266-143-6

Isotype IgG

Applications

The Abpromise guarantee

Our Abpromise guarantee covers the use of ab252655 in the following tested applications.

The application notes include recommended starting dilutions; optimal dilutions/concentrations should be determined by the end user.

Application	Abreviews	Notes
Sandwich ELISA		Use at an assay dependent concentration. Can be paired for Sandwich ELISA with Rabbit monoclonal [EPR20266-143] to Cardiac Troponin T - BSA and Azide free (Capture) (ab252596).

Target

Function Troponin T is the tropomyosin-binding subunit of troponin, the thin filament regulatory complex

which confers calcium-sensitivity to striated muscle actomyosin ATPase activity.

Tissue specificityHeart. The fetal heart shows a greater expression in the atrium than in the ventricle, while the adult

heart shows a greater expression in the ventricle than in the atrium. Isoform 6 predominates in normal adult heart. Isoforms 1, 7 and 8 are expressed in fetal heart. Isoform 7 is also expressed in

failing adult heart.

Involvement in diseaseDefects in TNNT2 are the cause of cardiomyopathy familial hypertrophic type 2 (CMH2)

[MIM:115195]. Familial hypertrophic cardiomyopathy is a hereditary heart disorder characterized by ventricular hypertrophy, which is usually asymmetric and often involves the interventricular septum. The symptoms include dyspnea, syncope, collapse, palpitations, and chest pain. They can be readily provoked by exercise. The disorder has inter- and intrafamilial variability ranging from benign to malignant forms with high risk of cardiac failure and sudden cardiac death.

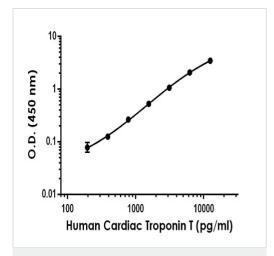
Defects in TNNT2 are the cause of cardiomyopathy dilated type 1D (CMD1D) [MIM:601494]. Dilated cardiomyopathy is a disorder characterized by ventricular dilation and impaired systolic function, resulting in congestive heart failure and arrhythmia. Patients are at risk of premature death.

Defects in TNNT2 are the cause of cardiomyopathy familial restrictive type 3 (RCM3) [MIM:612422]. Restrictive cardiomyopathy is a heart disorder characterized by impaired filling of the ventricles with reduced diastolic volume, in the presence of normal or near normal wall thickness and systolic function.

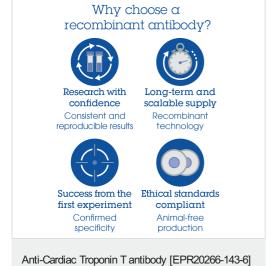
Sequence similarities

Belongs to the troponin T family.

Images



Sandwich ELISA - Anti-Cardiac Troponin T antibody [EPR20266-143-6] - BSA and Azide free (Detector) (ab252655) Representative standard curve from corresponding SimpleStep ELISA® Kit (ab223860).



- BSA and Azide free (Detector) (ab252655)

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- Extensive multi-media technical resources to help you
- We investigate all quality concerns to ensure our products perform to the highest standards

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